

D.C. Court of Appeals Appellate Mediation Program
CONFIDENTIAL MEDIATION STATEMENT

Send this form and attachments **ONLY** to the Appellate Mediation Project, c/o Multi-Door Dispute
Resolution Division, JM Annex, 500 Indiana Avenue, N.W., Washington, D.C. 20001.

DO NOT send any copies to opposing counsel.

If you need additional space, you may attach separate sheets, and reference the item number.

1. Case number and caption:
2. Name of counsel filing the statement:
3. Party represented:
4. Case type and a brief description of the facts that caused the initial dispute, including any injuries on which the claim for compensation is based, if it applies:
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5. Superior Court judgment/ruling on the case:
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6. Major issues on appeal (identify principal cases to be relied upon):
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7. Any past settlement offers that have been made, pre-trial and post-trial, the amount of the offer, and the current status of settlement discussions:
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Case Number:

8. Important factors affecting your client's chances for success on appeal:

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9. Your client's top priorities/interests:

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10. Any other related issues or information that may assist the Mediator in the resolution of this case, including involvement of any third parties that need to be present during settlement discussions to be able to reach decisions.

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11. Does your client need translator services? ☐ No ☐ Yes, in language

I certify that the information provided in this form is true and correct to the best of my knowledge.

Signature: _____ Date: _____

Name: _____

Address: _____

Telephone Number: _____

Attach a copy of the relevant orders, memoranda, and opinions from which this appeal has been taken.

The appellant should also attach a copy of the Superior Court's written decision or order.

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